

GENESEO FOUNDATION CHECK REQUEST FORM

Requested/Approved by: _____ Date: _____
Signature of Grant Recipient

Issue Check to: _____

In the amount of: \$ _____

FACULTY: Travel Grant Incentive Grant Proposal Writing Support Award
 Pre-Tenure Faculty Research Support Award TLC Innovation Grant
 STUDENT: TRAC Research/Creative Grant TRAC Travel Grant Rhodes Award
 Sorrell Chesin Research Award Dr. Battles and Dr. Mills Student Research Award

Grant Issued to: _____ Semester Issued: _____

Conference name: _____

Travel to: _____ Dates of travel: _____

Award #: _____

Include an explanation of expenses and attach documentation:

Supplies: _____ = receipt required

Equipment: _____ = receipt required

Airfare: _____ = receipt required

Conference Registration Fee: _____ = receipt required

Shuttles/Taxi/Uber/Train: _____ = receipt required

Other (include explanation): _____ = receipt required

Mileage: The current mileage rate is \$0.67/mile total miles roundtrip X per mile = **0.00** attach driving directions w/ to-from location

Note that auto travel will be reimbursed at the lesser of actual mileage costs or the cost of rental plus fuel

Lodging: total nights X \$ /night = **0.00** receipt required

Lodging should be based on current per diem rates for the location. <https://www.gsa.gov/travel/plan-book/per-diem-rates>

Food: include travel days away from home total days X \$ /day = **0.00**

Meals should be based on current per diem rates for the location. <https://www.gsa.gov/travel/plan-book/per-diem-rates>

Enter address below where check is to be mailed. Check requests **TOTAL** **\$0.00**

received by noon on Tuesday will be processed and mailed Thursday morning.

Name _____

Address _____

Phone _____ E-Mail _____

Submit form with attached receipt/documentation **IN HARD COPY** to:

Sue Crilly, Accounting Office, Doty 325A